



DENTAL BOARD OF CALIFORNIA
 1432 HOWE AVENUE, SUITE 85, SACRAMENTO, CA 95825-3241
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APPAPPP

APPLICATION FOR MOBILE DENTAL UNIT PERMIT**INSTRUCTIONS TO APPLICANT:****FEE: \$100.00 (Non-refundable)**

All information requested in this application must be supplied by the applicant. Each question must be answered fully, truthfully, and accurately. **ANY OMISSIONS, OR INACCURACIES ARE GROUNDS FOR DENIAL.** The Dental Practice Act provides that a willfully false statement in a material regard is a **MISDEMEANOR**. If the space for any answer is insufficient, the applicant may complete his or her answer on a rider signed by him or her and specifying the number of the question to which it relates.

OFFICE USE ONLY

Receipt No.: _____ RC No.: _____

Date Filed: _____ Fee Paid: _____

Approved: Yes _____ No _____

Permit No.: _____ Issue date: _____

(Please type or print legibly)

MOBILE UNIT APPLICATION

1. NAME: Last First Middle

2. Official Business or Mailing Address of Record for Mobile Unit:

Street and Number/Rural Route_____
City_____
State_____
Zip Code_____
Telephone Number_____
Dental License Number

2. Provide a written procedure for emergency follow-up care for patients treated in the Mobile Dental Clinic and that such procedure includes arrangements for treatment in a dental care facility which is permanently established in the area.

Attach the written procedure to this application as ATTACHMENT "A".

4. Please describe the communication facilities in the Mobile Dental Unit which will enable the operator to contact necessary parties in the event of a medical/dental emergency.

5. Does the Mobile Dental Unit conform to all applicable Federal, State and Local Laws dealing with Radiographic equipment, flammability, construction, sanitation and zoning laws and possess all applicable county and city licenses or permits to operate a mobile dental unit?

☐ Yes

☐ No

6. Does the driver(s) of the Mobile Dental Unit possess a valid California Driver's license?

☐ Yes

☐ No

7. Does the Mobile Dental Unit have the following:

a. An access ramp or lift if services are provided to Disabled persons;

☐ Yes

☐ No

b. An adequate, properly functioning sterilization system;

☐ Yes

☐ No

c. Access to an adequate supply of potable water, including hot water;

☐ Yes

☐ No

d. A ready access to toilet facilities;

☐ Yes

☐ No

e. A covered galvanized, stainless steel, or other non-corrosive metal container for deposit of refuse and waste materials.

☐ Yes

☐ No

If you answered "NO" to any of the questions above, please explain"

I am the applicant for a Mobile Dental Unit permit; I have carefully read the questions in the foregoing application and have answered them truthfully, fully, and completely.

I certify under penalty of perjury under the laws of the State of California, that the foregoing is true and correct.

Signature

Date

INFORMATION COLLECTION AND ACCESS

Agency requesting information: Department of Consumer Affairs, Dental Board of California, 1432 Howe Ave., Ste. 85, Sacramento, CA 95825-3241. (916) 263-2300 ext. 2332.

The information in this application is mandatory and is maintained by the Executive Officer in accordance with the Business and Professions Code, Division 2, Chapter 4, Section 1600, et. Seq. The information requested will be used to determine eligibility for a Mobile Dental Unit Permit.

Any known or foreseeable interagency or intergovernmental transfer which may be made of the information, when necessary, are other Federal, State, and local Law Enforcement agencies.

Each individual has the right to review the personal information maintained on them by the agency, unless the records are exempt from disclosure.

Effective January 1983, Section 1657 was added to the Business and Professions Code to read as follows:

“A licensed dentist may operate one mobile dental clinic or unit registered as a dental office or facility. The mobile dental clinic or unit shall be registered and operated in accordance with regulations established by the board, provided such regulations are not designed to prevent or lessen competition in service areas. A mobile dental clinic or unit registered and operated in accordance with the rules, and which has paid the fees, which may be established by the board, shall otherwise be exempted from the provisions of this article and Article 3.5 (commencing with Section 1658).”

MOBILE DENTAL CLINICS

Section 1049 of Title 16 of the California Code of Regulations became effective March 3, 1989. Section 1049 provides that a dentist may operate a mobile clinic and defines the requirements. The specific text reads as follows:

1049. Mobile Dental Clinics.

(A). Definition – For purposes of Section 1657 of the code, a “mobile dental clinic” or “mobile dental unit” means any self-contained facility in which dentistry will be practiced which may be moved, towed, or transported from one location to another.

(B). Application for Permit – A licensed dentist who wishes to operate a mobile dental clinic shall apply to the board for a permit by providing evidence of compliance with the requirements of this section and paying the fee prescribed in section 1021 for application for an additional office permit. The board shall inform an applicant for a permit in writing within 7 days whether the application is complete and accepted for filing, or is deficient and what specific information is required.

The board shall decide within 60 days after the filing of a completed application whether the applicant meets the requirements of a permit.

(C) Requirements.

(1) The applicant shall certify that:

(a) There is a written procedure for emergency follow-up care for patients treated in the mobile dental clinic and that such procedure includes arrangements for treatment in a dental facility which is permanently established in the area.

(b) The mobile dental clinic has communication facilities which will enable the operator thereof to contact necessary parties in the event of a medical or dental emergency.

(c) The mobile dental clinic conforms to all applicable federal, state and local laws, regulations and ordinances dealing with radiographic equipment, flammability, construction, sanitation and zoning and the applicant possesses all applicable county and city licenses or permits to operate the unit.

(d) The driver of the unit possesses a valid California Driver's license.

(2) The applicant shall maintain an official business or mailing address of record which shall be filed with the board. The board shall be notified within 30 days of any change in the address of record. All written or printed documents available from or issued by the mobile dental clinic shall contain the official address of record for the mobile dental clinic.

(3) Each mobile dental clinic shall:

(a) Have ready access to a ramp or lift if services are provided to disabled persons.

(b) Have a properly functioning sterilization system.

(c) Have ready access to an adequate supply of potable water, including hot water.

(d) Have ready access to toilet facilities.

(e) Have a covered galvanized, stainless steel, or other noncorrosive metal container for deposit of refuse and waste materials.

(D) Transferability. A permit to operate a mobile dental clinic is not transferable.

(E) Renewal. A permit to operate a mobile dental clinic expires at the same time as the permit holder's dental license. The permit holder may apply for a renewal and shall pay the fee set for renewal of an Additional Office permit.